

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2003

Application or Docket Number:

1052018/

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |  |               |                          |
|----------------------------------|--|---------------|--------------------------|
| TOTAL CLAIMS                     |  |               |                          |
| FOR                              |  | NUMBER FILED  | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          |  | 23 minus 20 = |                          |
| INDEPENDENT CLAIMS               |  | 2 minus 3 =   |                          |
| MULTIPLE DEPENDENT CLAIM PRESENT |  |               | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    |             | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|-------------|---|-------|---|------------------|
|  |             | Total                                     | Minus | **  | =                |
|  | Independent | *   | Minus | ***   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |             |   |       | <input type="checkbox"/>                    |                  |

SMALL ENTITY  
TYPE

OTHER THAN  
OF SMALL ENTITY

|           |     |              |     |
|-----------|-----|--------------|-----|
| RATE      | Fee | RATE         | Fee |
| BASIC FEE |     | OR BASIC FEE |     |
| XS 9=     |     | OR XS18=     |     |
| X43=      |     | OR X86=      |     |
| +145=     |     | OR -290=     |     |
| TOTAL     |     | OR TOTAL     |     |

SMALL ENTITY OR OTHER THAN  
OR SMALL ENTITY

|                            |                   |                            |                   |
|----------------------------|-------------------|----------------------------|-------------------|
| RATE                       | ADDITIONAL<br>FEE | RATE                       | ADDITIONAL<br>FEE |
| XS 9=                      |                   | XS18=                      |                   |
| X43=                       |                   | X86=                       |                   |
| +145=                      |                   | +290=                      |                   |
| TOTAL<br>ADDITIONAL<br>FEE |                   | TOTAL<br>ADDITIONAL<br>FEE |                   |

| AMENDMENT B                                    |             | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|-------------|---|-------|---|------------------|
|  |             | Total                                     | Minus | **  | =                |
|  | Independent | *   | Minus | ***   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |             |   |       | <input type="checkbox"/>                    |                  |

|                            |                   |                            |                   |
|----------------------------|-------------------|----------------------------|-------------------|
| RATE                       | ADDITIONAL<br>FEE | RATE                       | ADDITIONAL<br>FEE |
| XS 9=                      |                   | XS18=                      |                   |
| X43=                       |                   | X86=                       |                   |
| +145=                      |                   | +290=                      |                   |
| TOTAL<br>ADDITIONAL<br>FEE |                   | TOTAL<br>ADDITIONAL<br>FEE |                   |

| AMENDMENT C                                    |             | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|-------------|---|-------|---|------------------|
|  |             | Total                                     | Minus | **  | =                |
|  | Independent | *   | Minus | ***   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |             |   |       | <input type="checkbox"/>                    |                  |

|                            |                   |                            |                   |
|----------------------------|-------------------|----------------------------|-------------------|
| RATE                       | ADDITIONAL<br>FEE | RATE                       | ADDITIONAL<br>FEE |
| XS 9=                      |                   | XS18=                      |                   |
| X43=                       |                   | X86=                       |                   |
| +145=                      |                   | +290=                      |                   |
| TOTAL<br>ADDITIONAL<br>FEE |                   | TOTAL<br>ADDITIONAL<br>FEE |                   |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

• The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.